

## PART B - FEE(S) TRANSMITTAL

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Commissioner for Patents  
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APR 10 2006

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

27581 7590 01/13/2006  
MEDTRONIC, INC.  
710 MEDTRONIC PARK  
MINNEAPOLIS, MN 55432-9924

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

MOLLY CHLEBECK (Depositor's name)  
Molly Chlebeck (Signature)  
April 10, 2006 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/072,782	02/08/2002	James D. Webb	P-8712.02	2705

TITLE OF INVENTION: METHOD AND APPARATUS FOR REMOTELY PROGRAMMING IMPLANTABLE MEDICAL DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/13/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MALLARI, PATRICIA C	3736	600-300000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Girma Uboldt-Michael  
2. Daniel G. Chapik  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Medtronic, Inc.

(B) RESIDENCE (CITY and STATE OR COUNTRY)

Minneapolis, MN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2546 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Daniel G. Chapik  
Typed or printed name

Date

4/10/06

Registration No.

43,424

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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NO. 0607 P. 1

APR 10 2006

DOCKET NO: P8712.02

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FEE TRANSMITTAL

In re Application of: James D. Webb et al.  
For: METHOD AND APPARATUS FOR REMOTELY PROGRAMMING  
IMPLANTABLE MEDICAL DEVICES  
Serial No.: 10/072,782  
Filed: February 8, 2002

CERTIFICATE UNDER 37 CFR §1.8 I hereby certify that the paper(s)  
(3) total) as described herein are being sent to telefacsimile No. (571) 273-8300,  
MAIL STOP ISSUE FEE, Commissioner for Patents, P.O. Box 1450,  
Alexandria, VA 22313-1450, on April 10, 2006.

  
\_\_\_\_\_  
Signature

MOLLY CHLEBECK  
\_\_\_\_\_  
Printed Name

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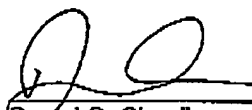
Sir:

We are transmitting herewith the attached:

- X PTOL FORM 85B
- X Fee Addressee For Receipt Of PTO Notices Relating To Maintenance Fee
  
- X Please charge Deposit Account 13-2546 \$1,400.00 Issue Fee and \$300.00 publication fee for a Total of \$1,700.00.
  
- X Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefore to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time and charge same to Deposit Account 13-2546. A duplicate of this transmittal is enclosed.

Date





\_\_\_\_\_  
Daniel G. Chapik  
Reg. No. 43,424  
Telephone: (763) 514-3066  
No. 27581